## FEC FORM 2

## STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Jones, Stephanie, , ,						
	(b) Address (number and street) 289 SUNSTAR CT					Candidate's FEC Identification Number     H8NV03234	
	(c) City, State, and ZIP Code					3. Is This New Amended	
	HENDERSON		NV	8901		Statement (N) OR (A)	
4.	Party Affiliation	5. Office Sought				trict of Candidate	
	REPUBLICAN PARTY	House			NV	03	
	DE	SIGNATION	OF PRII	NCIPAL	CAMPAIGN	N COMMITTEE	
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the election(s). (year of election)						
	NOTE: This designation should be f	iled with the appro	priate offic	e listed in th	ne instructions.		
	(a) Name of Committee (in full)  STEPHANIE JONES	S FOR CON	IGRES	S			
	(b) Address (number and street)						
	3255 St. Rose Pkwy						
	Suite 110						
	(c) City, State, and ZIP Code						
	Henderson				NV	89052	
<ul> <li>8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.</li> <li>NOTE: This designation should be filed with the principal campaign committee.</li> <li>(a) Name of Committee (in full)</li> </ul>							
	(b) Address (number and street) (c) City, State, and ZIP Code						
		mined this Statem	ent and to	the best of	my knowledge a	and belief it is true, correct and complete.	
Si	gnature of Candidate					Date	
Jo	ones, Stephanie, , ,	[Electronically Filed]				12/11/2017	
N	NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.						
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